

Site Accreditation Report – Minnehaha County Detox

Completed: December 11th, 2019

Levels of Care Reviewed:

Substance Use Disorder (SUD) Services

Clinically-Managed Residential Detoxification Services

Review Process: Minnehaha County Detox was reviewed by Division of Behavioral Health staff for adherence to the Administrative Rules of South Dakota (ARSD) and Contract Attachments. The following information was derived from the on-site accreditation survey of your agency. This report includes strengths, recommendations, and citations for Plans of Corrections and results from reviewing policies and procedures, personnel and case file records, and conducting interviews with clients, administration, and agency staff.

Administrative Review Score: 98.4.%

Combined Client Chart Review Score: 97.9%

Cumulative Score: 98%

ADMINISTRATIVE REVIEW SUMMARY

Strengths: Minnehaha County Detox staff are passionate about helping clients. The agency strives to create an atmosphere that is non-judgmental and respectful of clients. Staff interviewed report administration has created a culture that encompasses a team approach with feedback and positive reinforcement. Administration has an open-door policy and staff report feeling comfortable to bring up concerns or proposals. Administration is present on the floor to ensure safety checks are completed and staff are engaging the clients. The agency utilizes the nursing staff from Minnehaha County Jail whom report detox staff communicate openly to ensure the clients receive timely medical care when needed. Staff interviewed report finding creative ways to engage the clients in activities. The agency has an organized and robust policy and procedure manual. Staff are encouraged to attend frequent online educational opportunities provided by their parent company, West Care.

Recommendations: None

Plan of Correction: The following area will require a plan of correction to address the rule of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of this rule.

1. According to ARSD 67:61:07:04, the agency shall have written policy and procedure to ensure the closure and storage of case records at the completion or termination of a treatment program including:

- 1. The identification of staff positions or titles responsible for the closure of case records within the agency and the MIS;
- 2. Procedures for the closure of inactive client records, that are clients who have not received services from an inpatient or residential program in three days or clients who have not received services from an outpatient program in 30 days; and
- 3. Procedures for the safe storage of client case records for at least six years from closure.

The agency has the written policy and procedure regarding closure of records for inactive clients, however the policy stated client's files would need to be closed if the client had not received services for six months. The policy needs to be updated to the three-day time frame as listed above.

CLIENT CHART REVIEW SUMMARY

Strengths: The agency has positive relationships with other agencies and stakeholders in the community as evidenced by the documentation ensuring follow up for clients to receive treatment services after discharge from detox. When clients are unable to attend groups, the agency provides detailed notes in the chart to indicate why the client was unable to attend. Continued service reviews are required every other day for detox level of care, however the agency completed the continued stay reviews daily as a team which allows input from all staff. Medical information is clearly documented in the client charts. Staff completed thirty-minute well checks which includes documenting fluids given and completing vitals to ensure client safety. Staff interviewed discussed utilizing different approaches when a client is refusing vitals to ensure all required vitals are taken. Groups are being offered to the clients more than the required time for detox level of care for client engagement.

Recommendations: None

Plan of Correction:

The following area will require a plan of correction to address the rule of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of this rule.

1. According to ARSD 67:61:07:08, progress notes should include a brief description of the client's functioning and a brief description of what the client and provider plan to work on during the next session, including work that may occur between sessions, if applicable. In review of the progress notes, seven out of the eight charts reviewed had the same wording of what the client and provider plan to work on during the next session throughout the entire treatment episode. Each progress note should be individualized throughout the entire chart based on what the client and provider will be working on during the next session.